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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)

FEE TRANSMITTAL

For FY 2008

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

120.00

Complete if Known

| | |
|----------------------|-----------------|
| Application Number | 10/562,619 |
| Filing Date | May 26, 2006 |
| First Named Inventor | Boer et al. |
| Examiner Name | Candal Elpenrod |
| Art Unit | 2616 |
| Attorney Docket No. | Boer 10-6-6-6 |

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order None Other (please identify): _____

 Deposit Account Deposit Account Number: 500762 Deposit Account Name: _____

For the above-identified deposit account the Director is hereby authorized to: (check all that apply)

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| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below except for the filing fee |
| <input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments |

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | |
|------------------|-------------|--------------|-------------|--------------|------------------|--------------|
| | Fee (\$) | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity |
| Utility | 310 | 155 | 510 | 255 | 210 | 105 |
| Design | 210 | 105 | 100 | 50 | 130 | 65 |
| Plant | 210 | 105 | 310 | 155 | 160 | 80 |
| Reissue | 310 | 155 | 510 | 255 | 620 | 310 |
| Provisional | 210 | 105 | 0 | 0 | 0 | 0 |

2. EXCESS CLAIM FEES**Fee Description**Each claim over 20 (including Reissues) **Fee (\$)** **Fee (\$)**
50 25Each independent claim over 3 (including Reissues) **Fee (\$)** **Fee (\$)**
210 105Multiple dependent claims **Fee (\$)** **Fee (\$)**
370 185

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|--------------|--------------|----------|---------------|---------------------------------|
| - 20 or HP = | x | = | | Fee (\$) Fee (\$) |

HP = highest number of total claims paid for if greater than 20

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|---------------|--------------|----------|---------------|--------------------------------------|
| - 3 or HP = | x | = | | Fee (\$) Fee Paid (\$) |

HP = highest number of independent claims paid for if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 = | / 50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Extension of Time (One Month) **Fees Paid (\$)**
\$120.00**SUBMITTED BY**

| | | | |
|-------------------|------------------|--|------------------------|
| Signature | /Kevin M. Mason/ | Registration No (Attorney/Agent) 36,597 | Telephone 203-255-6560 |
| Name (Print/Type) | Kevin M. Mason | | Date April 28, 2008 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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